## PART B - FEE(S) TRANSMITTAL

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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	·	ATTORNI	EY DOCKET NO.	CONFIRMATION	NO.
10/723,301 11/24/2003 David Anthony Tanner 50325-0846(SEQ. NO. 9486 TITLE OF INVENTION: APPROACH FOR MANAGING NETWORK DEVICE CONFIGURATION DATA  8505)								
APPLN.TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE T	OTAL FEE(S) DUE	DATE DU	=
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nonprovisional EXAM	NO	\$1510 ART UNIT	\$300 CLASS-SUBCLASS	\$0 ]		\$1810	09/11/200	9
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DUONG, OANH L 2455  Change of correspondence address or indication of "Fee Address" (37)			709-223000  2. For printing on the p	-tt-Crant non- 1				
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent atto	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1 Hickman Palermo Truong & Becker LLP				
PLEASE NOTE: Unl	less an assignee is ident	ified below, no assigned	THE PATENT (print or type data will appear on the pa	atent. If an assign	nec is ident	ified below, the do	cument has been	filed for
recordation as set fort	h in 37 CFR 3.11. Comp	oletion of this form is NC	T a substitute for filing an assignment.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)					
Cisco Technology, Inc. San Jose, California USA							A	
Please check the appropr	riate assignee category or	eategories (will not be p	printed on the patent):	Individual 🗷 C	orporation	or other private gro	up entity 🔲 Gov	ernment
	are submitted:  No small entity discount p	<ul> <li>4b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fcc(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1302 (enclose an extra copy of this form).</li> </ul>						
5. Change in Entity Sta	tus (from status indicate	d above)			-5-0	<u> </u>		
a. Applicant elaim	s SMALL ENTITY state	us. See 37 CFR 1.27.	☐ b. Applicant is no lon	-				
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